

KEARNEY SUMMER HOCKEY SERIES 2011

THREE SESSIONS RUNNING THROUGHOUT THE SUMMER

RED SERIES DATES

May 31 Tue 5:45pm
 June 2 Thur 5:45pm
 June 4 Sat 12:30pm
 June 6 Mon 5:45pm
 June 7 Tue 5:45pm
 June 11 Sat 12:30pm
 June 13 Mon 5:45pm
 June 14 Tue 5:45pm
 June 18 Sat 12:30pm
 June 20 Mon 5:45pm
 June 21 Tue 5:45pm

WHITE SERIES DATES

June 25 Sat 12:30pm
 June 27 Mon 5:45pm
 June 28 Tue 5:45pm
 July 9 Sat 12:30pm
 July 11 Mon 5:45pm
 July 12 Tue 5:45pm
 July 18 Mon 5:45pm
 July 19 Tue 5:45pm
 * July 23 Sat 4:30pm
 July 25 Mon 5:45pm
 July 26 Tue 5:45pm

BLUE SERIES DATES

July 30 Sat 12:30pm
 Aug 1 Mon 5:45pm
 Aug 2 Tue 5:45pm
 Aug 6 Sat 12:30pm
 Aug 8 Mon 5:45pm
 Aug 9 Tue 5:45pm
 Aug 13 Sat 12:30pm
 Aug 15 Mon 5:45pm
 Aug 16 Tue 5:45pm
 Aug 20 Sat 12:30pm
 Aug 27 Sat 12:30pm

*All times above are 1.25 hrs in length!

COST: \$200 per session or \$400 for all three (Gold Series).

GOALIES: \$75 per session or \$150 for all three (Gold Series)

(Keep this upper portion for schedule of times)

CUT HERE

CUT HERE

Make checks payable to "**Kearney camps**" and mail to:

Sean Kearney
152 n 62nd street
Milwaukee Wi, 53213

or drop off at Eble Ice Arena. Registration forms are also available on the Eble website – www.waukeshacountyparks.com

For any other questions please contact Sean at (414) 334-1782 or "scarknee444@yahoo.com"

Please circle the session (sessions) you are signing up for:

RED \$200

May 31 - June 21

WHITE \$200

June 25 – July 26

BLUE \$200

July 30 – Aug 27

GOLD \$400

May 31 – Aug 27

EBLE ICE ARENA / KEARNEY SUMMER SERIES RELEASE OF LIABILITY

I am being allowed to participate in playing hockey at Eble Ice Arena. I understand that there are certain dangers inherent in playing hockey, skating and/or skating (on or off ice) activities that include but are not limited to injuries from contact with other skaters/players, sideboards, goal standards, the ice, puck/ball or other equipment. In consideration of being allowed to participate, I, individually and for all others who may make a claim based on injury to me, accept the risk of physical injury and release and discharge Waukesha County and all of it's employees, and Sean Kearney and any one person associated with his organization from any liability to me for any physical injury, which may occur while I am participating. I fully understand that the purpose and intent of this RELEASE is to prevent me and others who may claim through me from recovering any money or damages from Waukesha County and it's employees and Sean Kearney and those associated with him for any physical injury I suffer while playing hockey, skating or participating in any form of skating and on or off ice activities. This release is active for various date and times as scheduled – **valid May 31, 2011 thru August 27, 2011**

(Please print below)

Participant's Name _____ Level/Organization _____

Address _____ Years Playing / Position _____

City/State/Zip _____ Phone # _____

Email Address _____

Parent / Guardian Signature _____ Date: _____